| POSITION    |        | ID NO. | DATE                 |  |  |
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| CLASSIFIER  |        | 19     | 4/26/08              |  |  |
| EXAMINER    |        | 249    | 5/5/94               |  |  |
| TYPIST 343  | 5/9/90 |        | 13/1/90              |  |  |
| VERIFIER    | 1      |        | 1 1 1                |  |  |
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## INDEX OF CLAIMS

| .  | Claim  |               | Date         |        |          |          |          |  |                |               |
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|    | Final  | Original      | 35.37        | 9/24   |          |          |          |  |                |               |
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## BEST AVAILABLE COPY

|          | SYMBOLS                                 |                     |
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